United Nations E/CN.9/2012/NGO/3

Economic and Social Council

Distr.: General
3 February 2012

Original: English

Commission on Population and Development
Forty-fifth session
23-27 April 2012
Item 4 of the provisional agenda*
General debate on national experience in population matters: adolescents and youth

Statement submitted by Baha'i International Community

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.9/2012/2.

12-22321 (E) 090312

Please recycle

Statement

The Baha'i International Community welcomes the opportunity to offer its contribution to the deliberations of the Commission on Population and Development at its forty-fifth session, on the theme of adolescents and youth. We are pleased that the Commission has chosen to focus on this pivotal period of human development, comprising no fewer than 1 billion people between the ages of 10 and 19. This is a critical period of personal change during which young people begin to consciously explore and apply their knowledge, values and beliefs about individual and collective life. During this time, they take on new responsibilities — providing care at home, contributing to the family income, and becoming protagonists of change in their communities and nations. By the end of this period, many have taken on the full responsibilities of adults.

The projected growth of the world's population presents not only challenges but also manifold opportunities for the governments and nations of the world. According to the Department of Economic and Social Affairs, in 56 countries, half of the population is below the age of 20, and the U.S. Global Health Policy web page entitled "Population Under Age 15 (percent)" indicates that, in 47 countries, 40-50 per cent of the population is between the ages of 0 and 14. Present-day statistics paint a bleak picture of this group: half live in poverty and a quarter survive on less than the equivalent of one dollar a day. According to the United Nations Children's Fund and the Institute for Statistics of the United Nations Educational, Scientific and Cultural Organization, in 2009, 67 million primary school-age children and 72 million children of lower secondary school age were not in formal education, the majority of them girls. While the challenges are daunting, young people are not victims in need of others to solve their problems. Rather, this age group represents a tremendous source of intellectual and social potential waiting to be developed and channelled towards socially constructive ends.

The future of today's society will depend to a great extent on the manner in which educational programmes and methods are designed to release the latent potential of youth and prepare them for the world they will inherit. The connection between education and individual and collective well-being is well established and affirmed in paragraphs 11.2 and 11.3 f the Programme of Action of the International Conference on Population and Development and in the World Programme of Action for Youth to the Year 2000 and Beyond. Our contribution to this session of the Commission focuses on a particular dimension of education, namely "education in the service of community", which, in our experience, is central to the transformation of individual and community life. It is well known that the forces that influence the intellectual and emotional development of a child are not confined to the classroom. The forces acting on youth through the media, technology, family, peers, the wider community and other social institutions convey messages that may be reinforcing in some respects and contradictory in others, which contributes to confusion for many youth — about identity, moral purpose and social reality. As such, formal education needs to go beyond the exclusive aim of helping young people to secure gainful employment. Educational processes should help youth to recognize and express their potentialities while developing in them the capacity to contribute to the spiritual and material prosperity of their communities. Indeed, one cannot fully develop one's talents and capabilities in isolation from others.

The concept of a two-fold moral purpose — to develop one's inherent potential and contribute to the transformation of society — provides an important axis of the educational process. As one examines the influences shaping the minds of youth and adolescents, it becomes readily apparent that many forces breed passivity and a desire to be entertained. Such forces contribute to the formation of entire generations willing to be led by those who skilfully appeal to superficial emotions. Many educational programmes perceive young people as mere receptacles of information. To challenge these trends, the worldwide Baha'i community has endeavoured to develop a culture which promotes an independent way of thinking, studying and acting, and in which the students see themselves as united by a desire to work towards the common good, support one another and advance together, respectful of the knowledge that each one possesses.

Although conditions vary greatly from country to country and from community to community — whether rural or urban, materially rich or poor, peaceful or insecure — the centrality of knowledge to the flourishing of youth and adolescents remains unchanged. Access to knowledge is the right of every human being. The responsibility to generate new knowledge and apply it in socially beneficial ways rests on the shoulders of every young person. In the same way, the creation of an environment conducive to this process is a duty of every government. Without access to knowledge, the meaningful participation of youth in the affairs of their communities is not possible. The primary focus of educational processes, then, must be to build the capacity within young people to participate fully as protagonists of social progress.

Meaningful participation also takes the form of safe and productive employment. Education that does not instil in youth an awareness of their inherent potentialities, their role as active citizens and the needs of their community further weakens young people's prospects for employment. This in turn fuels the exodus of educated youth from rural to urban areas and from non-industrialized to industrialized nations. Young people, although often perceived as simply the beneficiaries of education, must be involved in the development of educational systems, thereby helping to align the content and methodology of educational processes with the needs and aspirations of their communities. This urgent need is further underscored by the rapid growth rates of the youth and adolescent population in some parts of the world.

In order for youth to play their important role, the inequities of girls' access to quality education must be addressed. As has been repeatedly affirmed, the education of girls has a multiplier effect, resulting in reduced chances of early marriage; the greater likelihood of girls taking an informed and active role in family planning; reduced infant and maternal mortality; enhanced participation of girls in social, economic and political decision-making; and the promotion of economic prosperity. This is particularly urgent in parts of the world where adolescent girls are married and begin to bear children. The need to extend educational opportunities to girls rests on the understanding that the equality of men and women and boys and girls is a fundamental truth about human reality and not just a desirable condition to be achieved for the good of society. Their full participation in the arenas of law, politics, science and technology, commerce and religion, to name but a few, are needed to forge a social order enlightened by the contributions and wisdom of fully half of the world's population. As women are one of the most powerful influences on the health and well-being of their children, deficiencies in the mother's

education, will, in most cases, multiply throughout succeeding generations. Governments, then, must follow through on their commitments to prohibit such unjust practices as infanticide, prenatal sex selection, female genital mutilation, the trafficking of girl children and the use of girls in prostitution and pornography, and to enforce laws to ensure that marriage is entered into only with the free and full consent of both spouses. The overarching objective must be to address the root causes of gender bias so that all people can play their rightful role in the transformation of society.

The investments that governments make in the education and health of their youth and adolescents represent no less than an investment in the stability, security and prosperity of the nation itself. Educational approaches and methods, guided by the needs and aspirations of respective communities, supported by families and social institutions and inspired by the awareness of the inestimable latent potential in every child, will awaken youth and adolescents not only to their own intellectual capabilities but also to their role as protagonists of change in their communities and in the world.

United Nations E/CN.9/2012/NGO/4

Economic and Social Council

Distr.: General
6 February 2012

Original: English

Commission on Population and Development
Forty-fifth session
23-27 April 2012
Item 4 of the provisional agenda*
General debate on national experience in population matters: adolescents and youth

Statement submitted by International Planned Parenthood Federation, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.9/2012/2.

12-22394 (E) 010312

Please recycle

Statement

International Planned Parenthood Federation is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a movement of national organizations working with and for communities in 173 countries worldwide. The organization works to provide young people[1] with the information they need to make informed decisions about their sexual and reproductive lives, as well as the means to access services (both clinical and non-clinical) when and if required.

The Programme of Action of the International Conference on Population and Development specifically recognizes the sexual and reproductive health needs of adolescents and identifies this age group as one whose needs have largely been ignored. It also recognizes the right of adolescents to access sexual and reproductive health services and information in a manner that respects their privacy and confidentiality. Yet, in 2011, with half of the world's population under the age of 25, the majority of this age group lives in countries where access to such resources remains limited. The need for sexual and reproductive health services for young people is undisputable: nearly 13 million adolescent girls give birth each year in developing countries, most often before they are physically, financially or emotionally prepared; complications from pregnancy and childbirth remain the leading cause of death among young women aged 15 to 19 in developing countries; half of all new HIV infections are among young people; and an estimated 4,000 to 5,000 young people acquire HIV every day. When a girl in a developing country receives seven or more years education, she marries four years later and has 2.2 fewer children. However, a girl growing up in Chad is more likely to die in childbirth than she is to attend secondary school. Access to information and contraception are therefore part of a package that young people need in order to break generations-long cycles of poverty and gender inequality.

To access sexual and reproductive health services, young people face unique barriers that are compounded by or in addition to age-related barriers. Many of these barriers relate to the withholding of information or services, which only serves to exacerbate the vulnerabilities young people face. It is also in direct violation of the rights afforded them under international human rights law.

Parents, guardians, teachers, health professionals and other adults who work with and for young people have a responsibility to support young people and provide them with learning opportunities so that they can build their capacity and transition from reliance to independence. This is particularly true in relation to sexual and reproductive health; a balance must be struck between protecting young people from abuse or exploitation and allowing them to freely and autonomously express their will and intention.

The pace at which capacities evolve differs for each individual and is dependent on life circumstances. The organization contends that age should not be used as an indicator of a young person's capacity to make autonomous decisions. Despite this, age is often utilized as a determinant of capacity in law, and in the personal estimation of health professionals, which can lead to the perpetuation of

[1] The International Planned Parenthood Federation uses the term "young people" to refer to those aged 10 to 24. This encompasses the adolescent subgroup, which refers to those aged 10 to 19. For the purposes of this statement, the term "young people" will be used to refer to adolescents.

judgmental attitudes. Laws that require parental consent or notification to access sexual ar reproductive health services are a manifestation of the presumption of incapacity. These laws persist, despite the call made in paragraph 7.45 of the Programme of Action for States to remove legal barriers that prevent young people from accessing sexual and reproductive health information and services. However, legal and policy provisions that mandate parental involvement in the realm of sexual and reproductive health often deter young people from accessing services for fear that their parents may discover they are sexually active. This is contrary to young people's rights to privacy, confidentiality and the highest attainable standard of health.

The International Planned Parenthood Federation believes that young people should be encouraged to voluntarily involve their parents, guardians or other trusted adults in their decision-making processes. The positive role that adults can play in young people's lives is well recognized throughout the organization. While the opinions and knowledge of peers are of great importance to young people in making decisions related to their sexual and reproductive health, research shows that young people would prefer the support of a trusted adult when it comes to accessing health services.

Sexual and reproductive health-related stigma is compounded for young people by their age and norms relating to young people's sexuality. Stigma means that young people are inhibited from feeling free to express their sexuality, talk openly about sex with their parents or guardians or access sexual and reproductive health information and services. Communities, families and religious institutions have a duty to encourage open and accurate dialogue on young people's sexuality with a view to reducing stigma.

Self-stigmatization is a strong force that prevents young people from accessing the information and services they need as a result of feelings of fear, shame or embarrassment. This can be particularly true for young women who are sexually active; young people who are gay, lesbian, transgender or bisexual; young people living with HIV; and, in some contexts, unmarried young men and women. Health professionals, communities and government institutions should adopt non-judgmental attitudes to reduce stigma and promote services as being for everyone. Promoting preventive services and counselling can also assure potential young clients that there will be no presumption that they are sexually active when they walk through the door.

Primary and secondary schools provide a crucial opportunity for reaching young people with information and life skills relating to sex, health and relationships while challenging harmful gender or other norms that perpetuate sexual and reproductive ill health. Despite this, scientifically unfounded objections supposing that the provision of such information will encourage sexual activity dominate discourse in many regions. Educators are often not adequately trained or comfortable imparting sexual and reproductive health and rights information to young people. Member States must raise awareness of the importance of sexuality education and train educators to feel confident in providing sexuality education to young people of all ages. It is also necessary to ensure that comprehensive sexuality education is included in informal settings. Formal education settings provide an ideal opportunity to reach young people. However, many young people, particularly young women, leave this setting at a young age. Therefore, any national

comprehensive sexuality education programme should prioritize outreach to out-of-school and other marginalized groups of young people.

Many young people also experience "access barriers" that relate to the practical or logistical means by which they access sexual and reproductive health services. Young people, particularly young adolescents, are less mobile and therefore experience difficulty in accessing sites where they can access services and information. Financial barriers also exist if measures are not put in place to allow young people access to services at a discounted cost. Opening times of service delivery points may also be a barrier, if they coincide with school or working hours. Providing sexual and reproductive health services at times and in places within the reach of young people is a way to increase access.

Every day, 500,000 young people are infected with a sexually transmitted infection (excluding HIV), and 45 per cent of new HIV infections occur in young people. Every year, young women between the ages of 15 and 19 undergo 2.5 million unsafe abortions that put their lives and health at risk, yet among this age group, the unmet need for contraception stands at 25 per cent. To address this and the barriers identified above, programmes to improve young people's sexual and reproductive health must include three essential pillars: (a) comprehensive sexuality education; (b) youth-friendly sexual and reproductive health services; and (c) political and social change to create favourable environments within which young people can exercise and realize their sexual and reproductive health and rights.

Comprehensive sexuality education is an essential intervention to ensure that all young people are aware of their sexual and reproductive rights, are empowered to make informed choices and decisions and are able to act on these decisions. Comprehensive sexuality education is more than the provision of information about health and sexuality; it also aims to develop critical-thinking skills, confidence, communication skills, decision-making capacities, gender equity and rights-based civic participation.

Young people must have access to youth-friendly sexual and reproductive health services. To be youth-friendly, the services must be accessible, acceptable, equitable and of a high quality. The importance of well-trained, non-judgmental health professionals and staff members in service delivery points serving young people should not be underestimated.

In programmes to promote the sexual and reproductive health of young people, special attention and resources must be dedicated to eradicating harmful gender norms and inequality. The International Planned Parenthood Federation promotes a positive approach to the sexuality of young women and girls, with the aim of helping them to become confident, autonomous decision-making individuals. All young women and girls have the right to make autonomous decisions related to their sexual and reproductive health in accordance with their evolving capacities. Withholding the right of young women and girls to information and the means to act upon those decisions perpetuates inequality and ill health. Their ability to exercise the right to decide is influenced as much by their family and community as by social norms and policy.

The organization believes that programmes aimed at eradicating harmful gender norms and inequality must also engage young men and boys. Such

programmes must move away from an approach that sees them as perpetrators of rights violations towards an approach that is guided by their best interests and that more effectively addresses their sexual and reproductive health needs.

Recommendations

The International Planned Parenthood Federation believes that young people have a right to information to allow them to make informed decisions and a right to access the services required to turn those decisions into reality without fear of reprisal or shame. Recognizing that young people, including adolescents, are rights holders to which the rights spelled out in United Nations conventions apply, and recognizing that access to comprehensive sexuality education and sexual and reproductive health services are essential to fulfilling a young person's right to the highest attainable standard of health, the organization believes that Member States must:

- Remove and refrain from implementing laws that restrict young people's access to sexual and reproductive health services, including parental or spousal consent laws
- Refer only to scientifically sound evidence when formulating education policy and curricula on sexuality education, and commit resources to strengthen the evidence-base on this
- Provide opportunities for young people to obtain the knowledge and life skills they need to make informed decisions about their sexual and reproductive health, including through the provision of sexuality education in schools
- Recognize both in principle and in law the evolving capacity of young people to consent to sexual and reproductive health treatment, services and care
- Take steps to ascertain young people's real and perceived sexual and reproductive health needs, and include young people in identifying and addressing such needs
- Address the practical and logistical barriers that young people face in accessing life-saving and life-enhancing services, including through the reduction of financial and geographical barriers
- Ensure that all young people with a need for contraception have access to such services
- Ensure that a comprehensive package of sexual and reproductive health services, including safe abortion services, is available for all young people
- Ensure that health professionals are adequately trained to provide information and services to young people, including sexually active young people, in a non-judgmental manner
- Ensure sufficient educators are trained to provide comprehensive sexuality education to young people from an early age
- Promote the education of parents, guardians, communities and others to provide guidance and support to young people as they mature, in accordance with paragraph 7.48 of the Programme of Action

- Recognize the vital role that schools play in disseminating information and in linking with sexual and reproductive health services for young people
- Address inequality of access to services among young people, particularly for those in rural areas
- Ensure that data is available to monitor progress towards achieving universal coverage of sexual and reproductive health services to young people
- Ensure young people are meaningfully engaged in decision-making and programming at the local, national and international levels

United Nations E/CN.9/2012/NGO/5

Economic and Social Council

Distr.: General
6 February 2012

Original: English

Commission on Population and Development
Forty-fifth session
23-27 April 2012
Item 4 of the provisional agenda*
General debate on national experience in population matters: adolescents and youth

Statement submitted by Fundación para Estudio e Investigación de la Mujer, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.9/2012/2.

12-22408 (E) 090312

Please recycle

Statement

In defence of the advancement of the Programme of Action of the International Conference on Population and Development beyond 2014, and to improve the health and uphold the human rights, including sexual and reproductive rights, of all adolescents, young people and women, the Fundación para Estudio e Investigación de la Mujer (FEIM) urges Governments:

- **To reaffirm the importance of the implementation of the Programme of Action** as an effective contribution to achieving universal access to prevention, treatment, care and support and realizing sexual and reproductive rights, as basic human rights, for all adolescents and young people, especially adolescent girls, young women and sexual diversity.

- **To empower adolescents and young people, especially adolescent girls and young women, to actively participate and hold leadership roles** in the follow-up to the implementation of the Programme of Action and the key actions for its further implementation (General Assembly resolution S-21/2, annex) and in the planning, implementation and evaluation of policies, programmes and services for helping all people to meet their health and education needs (Programme of Action, paras. 6.15, 8.7; key actions, para. 80); and to establish mechanisms to guarantee their participation, especially of young women in countries of the Global South, in national and international commissions contributing to this process. The planning, budgeting and reporting developed on HIV and sexual and reproductive health at all levels must incorporate sex- and age-disaggregated data on adolescents and young people based on five-year age groups (10-14 years; 15-19 years; 20-24 years).

- **To ensure the delivery of and universal access to comprehensive sexual and reproductive health services as basic human rights for adolescents and young people (15-24 years old), especially young women and girls as one of the most underserved and vulnerable groups in the population** (Programme of Action, paras. 7.6, 7.16). They must include access to essential commodities without the consent of an adult, including male and female condoms and other prevention methods for unplanned pregnancies and HIV and other sexually transmitted infections, as well as emergency contraception and access to safe abortion where permitted by law (Programme of Action, paras. 7.16, 7.33). These services must be gender-sensitive and evidence- and human rights-based, safeguarding the rights of adolescents and young people to privacy, confidentiality, respect and informed consent (Programme of Action, para. 7.45). This is necessary for young people and adolescents to make healthy and informed decisions about their sexual and reproductive health and reduce their vulnerability to HIV transmission and early pregnancies (Programme of Action, para. 7.46). In most countries in Latin America legal and social barriers that impede adolescents and young people from accessing these services still exist. In Argentina the majority of sexual and reproductive health services do not provide adolescents and young people with prevention methods and deny them services despite the fact that these are permitted by law. To overcome these obstacles, Governments must work with health-care service providers to remove all legal and social barriers to these services for young people and adolescents (Programme of Action, para. 7.45).

- **To propel the integration of HIV/AIDS into sexual and reproductive health services and comprehensive sexuality education programmes**, ensuring that all health professionals in these services and programmes are sensitive to gender and sexual diversity and have up-to-date training and information about prevention of sexually transmitted infections and HIV/AIDS, diagnosis and treatment in all adolescents, young people and women as well as screening for gender-based violence, and provide appropriate counselling and referrals (Programme of Action, para. 8.31).

- **To guarantee women's, young people's and adolescents' sexual and reproductive rights and improve maternal health**. Women's right to decide for themselves if, when and with whom to have children must be fully upheld (Programme of Action, para. 7.2). They must be guaranteed other essential reproductive health services, including abortion when permitted by law, post-abortion care, provision of prenatal controls, safe delivery and postnatal care, especially for high-risk pregnancies and births to avoid maternal mortality, particularly to adolescent girls (Programme of Action, paras. 7.6, 8.22, 8.23).

- **To scale up resources for strengthening health systems to guarantee universal access to HIV prevention services and commodities to decrease the feminization of HIV/AIDS especially among girls in the 15-24 age group** (Programme of Action, para. 8.33; key actions, para. 95). For example, in Argentina, since 2004, the only age group where infections predominate among females is the 15-24 age group (0.9 male to one female), and it is even higher in the 15-19 age group (0.8 male to one female), yet sexual and reproductive health services still do not provide sufficient male condoms for prevention, and female condoms are not distributed by the Government and are not available at stores. Special emphasis should be placed on scaling up evidence-based prevention practices, including confidential and voluntary counselling and testing for HIV and HPV (human papilloma virus), and access to treatment in all countries (key actions, para. 68).

- **To guarantee the provision of comprehensive sexuality education that addresses HIV transmission and prevention for all female and male adolescents and young people, especially young girls, from a gender and human rights perspective**, to achieve the 95 per cent goal established in the key actions for the further implementation of the Programme of Action and in the Declaration of Commitment on HIV/AIDS adopted by the General Assembly in June 2001 (Programme of Action, para. 7.47; key actions, para. 70). Comprehensive sexuality education is absent in most countries in Latin America and the Caribbean, even in many of those where it is mandated by law, such as Argentina. Also, before the XVII International AIDS Conference in Mexico in 2008, all the countries in Latin America and the Caribbean, represented by their Health and Education Ministers, signed an agreement to implement comprehensive sexuality education, but its implementation has been very slow and faces many obstacles due to opposition from political and religious sectors.

- **To adopt strong national legislation that promotes and protects gender equality and the rights of all people to live free of discrimination, coercion and violence, and includes concrete measures to eliminate all forms of discrimination and violence against women and girls in general and in the**

HIV response. Violence against women and girls is on the rise worldwide, and is a major violation of women's human rights and a primary impediment to empowerment of young and adolescent women. Forms of gender-based violence particularly affecting adolescent girls and young women, which are fuelled by gender inequalities and require urgent attention for their eradication, include early and forced marriage, sexual abuse, female genital mutilation, and violence witnessed and suffered by children in household environments where domestic violence occurs (Programme of Action, paras. 4.4, 7.35, 7.39, 7.40). Gender discrimination and inequality also result in lack of access to economic, social and educational opportunities for girls, which limits their knowledge and exercise of their sexual and reproductive rights, putting them at greater risk of early pregnancy and HIV infection (Programme of Action, para. 7.42).